

**MICHIGAN DEPARTMENT OF CORRECTIONS
CONSULTATION**

SITE: LCF**COMPLETED BY: Connie McCool (01/24/2019 1:33 PM) 01/29/2019 10:45 AM****Patient: MITCHELL SPROESSIG****ID#: 299543****DOB: [REDACTED]**

Reference #:

Date of Request: 01/24/2019

3rd Party Insurance: (VA, Workmen's Comp, Federal, Interstate Compact, etc.):

MDOC

For security reasons, inmates must NOT be informed of date, time or location of proposed treatment or possible hospitalization. Authorization and payment is provided ONLY for requested procedures or treatments of life-threatening conditions. Prior review/discussion with Medical Director is required for additional treatment, procedures and hospitalizations.

Procedure/Test Requested: Consult**Specialty Service Requested: Surgery****Presumed Diagnosis:**

Hyperlipidemia, mixed	272.2
Hypertension, essential NOS	401.9
GERD	530.81

Signs & Symptoms:**Date of Onset:**

Patient with ventral hernia, c/o constant pain and discomfort. Patient states that he has had for years and now it is getting worse, he states he is unable to do any exercise or any activities which needs him to stand for long time or any bending activities.

Exam—Ventral hernia, measuring about 10cm per the RN, even with patient laying back the hernia is significantly enlarged and does not spontaneously reduce.

Patient seen on telemed.

Enrolled in Chronic Care Clinic(s)?

<u>Clinic</u>	<u>Chronic Condition</u>	<u>Code</u>	<u>Last Visit</u>
Fair	Hypertension		06/25/2016

Current Active Medications:

<u>Start Date</u>	<u>Stop Date</u>	<u>Medication Name</u>	<u>Sig Desc</u>
10/09/2018	04/09/2019	Lopid 600 mg tablet	Take 1 by mouth 2 times a day (KOP)
10/16/2018	04/09/2019	hydrochlorothiazide 25 mg tablet	take one by mouth every day KOP
10/16/2018	04/09/2019	lisinopril 10 mg tablet	1-PO once daily every morning. KOP
10/16/2018	04/09/2019	Tums 200 mg calcium (500 mg) chewable tablet	1 three times a day as needed (KOP)

NAME: SPROESSIG, MITCHELL D

NUMBER: 299543

D.O.B.: [REDACTED]

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COMPLETED BY: Bhamini Sudhir MD 01/24/2019 1:33 PM

01/24/2019 04/09/2019 Zantac Maximum Strength 150 mg tablet take one tablet twice a day as needed

Site Medical Provider: Bhamini Sudhir MD 01/24/2019

(For UM use only)

Criteria Source: M & R Interqual Other

Criteria met: Yes No Deferred

Reviewer comments:

Recommendation for visit appointment:

Visits:

UM Review #:

Reviewer Name:

Date Reviewed:

Note: Notify physician or midlevel practitioner immediately if unable to obtain appointment within 4 weeks. If service is not completed within 4 weeks, have patient re-evaluated by physician or midlevel practitioner to determine if service is still necessary and appropriate.

NAME: SPROESSIG, MITCHELL D
NUMBER: 299543
D.O.B.: [REDACTED]